

## **NC Tuberculosis Control Program Policy Manual**

### **I. Statement of Purpose**

The goal of the North Carolina Division Public Health Communicable Disease Branch TB Control Program is to decrease morbidity and mortality from tuberculosis among people residing in North Carolina. The program aims to achieve this goal through an integrated strategy of prevention and treatment. Aggressively interrupting transmission through appropriate disease treatment, minimizing the number of people who become newly infected, and providing appropriate preventive treatment to those who are infected are necessary to accomplish this goal.

The health department has the legal authority and responsibility to coordinate all TB efforts in its jurisdiction. The TB Medical Advisory Committee provides input for TB Control program policy development. Medical, nursing, epidemiologic, and health education support for health departments and other health care providers are available through the state TB Control program.

The North Carolina Tuberculosis Policy Manual, in conjunction with the following references, provides policy for local health departments for the management of tuberculosis disease and infection:

***Recommendations for Tuberculosis Screening, Testing, and Treatment of Health Care Personnel. May 17, 2019. CDC and NTCA.***

***Interactive Core Curriculum on Tuberculosis. CDC, 2016.***

***Treatment of Drug Susceptible Tuberculosis. Clinical Infectious Disease. 2016***

***2015 Red Book: Report of the Committee on Infectious Diseases, 30th Edition, American Academy of Pediatrics.***

***Guidelines for the Prevention and Treatment of Opportunistic Infections in HIV-Infected Adults and Adolescents. 2019***

***Managing Drug Interactions in the Treatment of HIV-Related Tuberculosis. CDC 2013***

***Centers for Disease Control and Prevention. Targeted Tuberculin Testing and Treatment of Latent Tuberculosis Infection. MMWR 2000; 49 (No. RR-6).***

***Centers for Disease Control and Prevention. Guidelines for Investigation of Contacts of Persons with Infectious Tuberculosis. MMWR, 2006; 54 (No. RR-15).***

***Centers for Disease Control and Prevention. Guidelines for Preventing the Transmission of Mycobacterium tuberculosis in Health-Care Settings, MMWR 2005;54 (No. RR-17).***

**Centers for Disease Control and Prevention. *Prevention and Control of Tuberculosis in Correctional and Detention Facilities: Recommendations* from CDC; 2006; 55 (No. RR-9).**

Copies of many TB references may be downloaded at:  
[https://www.cdc.gov/tb/education/provider\\_edmaterials.htm](https://www.cdc.gov/tb/education/provider_edmaterials.htm)

The Manual text is available on the TB Control website at:  
<https://epi.publichealth.nc.gov/cd/lhds/manuals/tb/toc.html>

Future revisions to the 2019 TB Control Program Policy Manual will be available only on the referenced website.

**Contact information for NC TB Control:**

N.C. Department of Health and Human Service  
Division of Public Health, General Communicable Disease Branch (GCB)  
Tuberculosis Control Program  
1902 Mail Service Center, Raleigh, NC 27699-1902  
Telephone: 919-755-3184  
Fax: 919-733-0084  
Courier #: 56-32-21

1. TB Medical Director services include:
  - a. Telephone consultation with health departments (HD), private medical doctors (PMD) and other health care providers about diagnosis, treatment and medical management of TB infection and disease.
  - b. Education for any health care provider regarding TB medical management.
  - c. Chest film consultation to HDs/PMDs for abnormal chest films when TB is suspected or to be ruled out.
  - d. Contact information for the State TB Medical Consultants:
    - Dr. Jason Stout is available for consultation for all adult patients and may be reached by calling the Duke University operator at 919-684-8111 and asking that s/he page Dr. Jason Stout.
    - Fax number for Dr. Stout is 919-681-7494
    - Mailing address is:
      - Duke University Medical Center  
Division of Infectious Diseases  
Box 102359 DUMC  
Durham, NC 27710
    - To send X-rays by FedEx, UPS, etc., please send to:
      - Dr. Jason Stout  
Duke University Medical Center, Div. of Infectious Diseases  
Room 181  
First floor, Hanes House

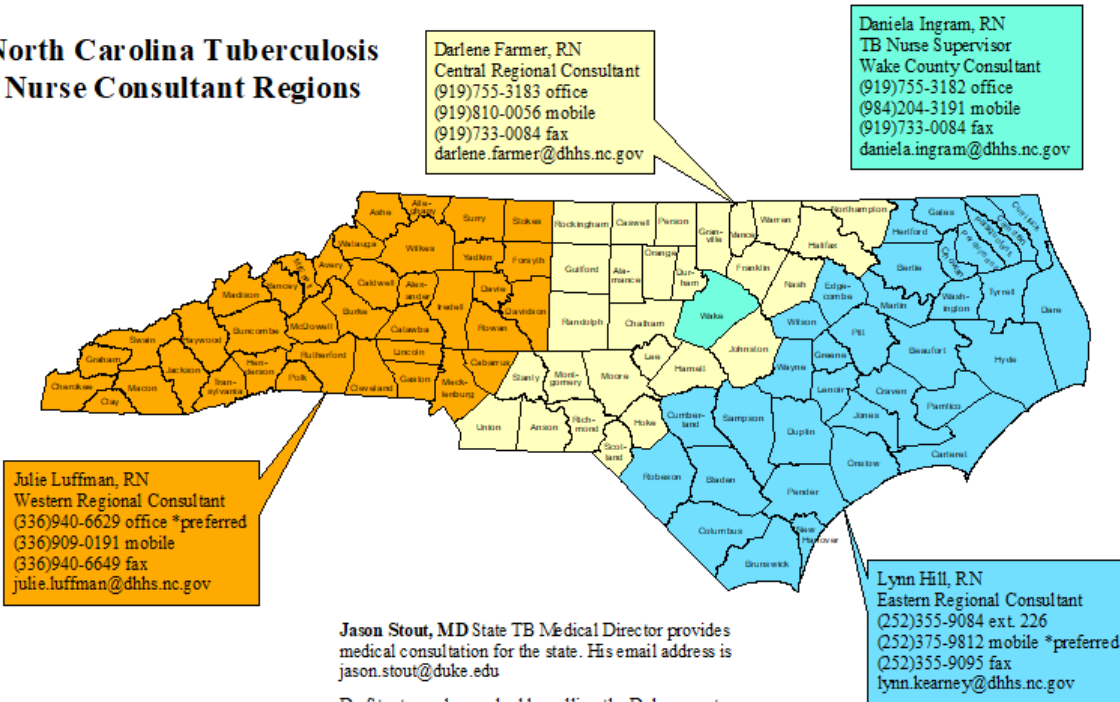
330 Trent Drive  
Durham, NC 27710

- Contact Dr. Amina Ahmed for pediatric consultations by calling her mobile number:
  - Department of Pediatrics  
Levine Children's Hospital  
1000 Blythe Blvd.  
MEB 4<sup>th</sup> Floor  
Charlotte, NC 28203  
Phone: 704-381-6803  
Fax 704-381-6841  
Mobile: 704-258-1341

2. Nurse consultant services include:

- a. Quality assurance for local TB programs including annual assessments.
- b. Consultation regarding community TB surveillance and patient management.
- c. Orientation and educational programs for health departments and other health care providers.
- d. Contact information for nurse consultants (see map next page)

## North Carolina Tuberculosis Nurse Consultant Regions



Effective as of September 1, 2020

Dr. Stout may be reached by calling the Duke operator at 919-684-8111 and ask that they page the physician.

## Abbreviations

Refer to the list below for abbreviations used in the manual.

3HP	3 months isoniazid + rifapentine (once weekly)
4RIF	4 months rifampin (daily)
6INH	6 months isoniazid (daily)
9INH	9 months isoniazid (daily)
AAP	American Academy of Pediatrics
ACET	Advisory Council for the Elimination of Tuberculosis
ACH	air changes per hour
AFB	acid-fast bacilli
AIDS	acquired immunodeficiency syndrome
AK	amikacin
All	airborne infection isolation
ALT	alanine aminotransferase
ARPE	<i>Aggregate Report for Program Evaluation</i>
ART	antiretroviral therapy
AST	aspartate aminotransferase
ATS	American Thoracic Society
BAMT	blood assay for <i>Mycobacterium tuberculosis</i>
BCG	Bacille Calmette-Guérin
CAP	capreomycin
CDC	Centers for Disease Control and Prevention
CIS	ciprofloxacin
CIS	cycloserine
CT	computed tomography
CXR	chest radiograph

DNA	deoxyribonucleic acid
DOT	directly observed therapy
DPS	Department of Public Safety
DS Form	Department of State Form
DTBE	Division of Tuberculosis Elimination
DTH	delayed-type hypersensitivity
ED	emergency department
EMB	ethambutol
EMS	emergency medical service
ESRD	end-stage renal disease
FDA	U.S. Food and Drug Administration
HAART	highly active antiretroviral therapy
HCW	healthcare worker
HCP	health care personnel
HEPA	high-efficiency particulate air
HIPAA	Health Insurance Portability and Accountability Act
HIV	human immunodeficiency virus
HLV	Health Law Violator
IDSA	Infectious Diseases Society of America
IGRA	interferon gamma release assay
INH	isoniazid
KM	kanamycin
LHD	Local Health Department
LTBI	latent tuberculosis infection
<i>M. tuberculosis</i>	<i>Mycobacterium tuberculosis</i>
MDR-TB	multidrug-resistant tuberculosis
MIRU	mycobacterial interspersed repetitive units

MMWR	Morbidity and Mortality Weekly Report
MOTT	mycobacterium other than tuberculosis
MXF	moxifloxacin
NAAT	nucleic acid amplification Test
NCEDSS	North Carolina Electronic Disease Surveillance System
NIOSH	National Institute for Occupational Safety and Health
NNRTI	nonnucleoside reverse transcriptase inhibitors
NTCA	National Tuberculosis Controllers Association
NTM	nontuberculous mycobacteria
NTNC	National Tuberculosis Nurse Coalition
OSHA	Occupational Safety and Health Administration
PAPR	powered air-purifying respirator
PCR	polymerase chain reaction
PA	Posterior-Anterior
PAS	Para-aminosalicylic acid
PAPR	Powered air purifying respirator
PI	protease inhibitor
PHN	Public Health Nurse
PMD	private medical doctor
PPD	purified protein derivative
PPE	personal protective equipment
PZA	pyrazinamide
QA	quality assurance
QFT	QuantiFERON®-TB test
QFT-GIT	QuantiFERON®-TB Gold In-tube
RFB	rifabutin
RFLP	restriction fragment length polymorphism

RIF	rifampin
RIPE	Standard TB Treatment with rifampin, isoniazid, pyrazinamide, ethambutol.
RNA	ribonucleic acid
RPT	rifapentine
<i>RVCT</i>	<i>Report of Verified Case of Tuberculosis</i>
RZ	rifampin and pyrazinamide
SM	streptomycin
TB	tuberculosis
THA	ethionamide
TIMS	Tuberculosis Information Management System
TNF- $\alpha$	tumor necrosis factor-alpha
TLTBI	treatment of latent TB infection
TST	tuberculin skin test
TU	tuberculin units
USCIS	U.S. Citizenship and Immigration Services
UVGI	ultraviolet germicidal irradiation
XDR-TB	extremely drug-resistant tuberculosis